



BECOMING A BISD VOLUNTEER!

Volunteers are recognized as an important part of the educational program in providing support services. We need you and want you to volunteer. Any parent or community member who wishes to become a school volunteer on a regular or frequent basis shall follow the procedure outlined in this letter.

- Complete form for campus file
- Complete forms authorizing **CRIMINAL** Background Check
- Submit completed forms to classroom teacher or principal
- Wait for administrative clearance
- Begin volunteering

In order to ensure the safety of our students, local board policy dictates that BISD shall perform a **CRIMINAL history record check on all employees as well as substitutes and volunteers.** [See Texas Education Code 22.0835(a)(b), Board policy DC (Legal), and GKG (Legal)].

In addition, Education Code 22.053 states, “A volunteer who is serving as a direct service volunteer in the district is immune from civil liability, to the same extent as professional employee of a school district under Section 22.051.”

The information obtained by the district concerning **CRIMINAL background history** remains confidential and is kept in a separate file in the Office of Human Resources.

We look forward to your assistance and contribution to the welfare and education of Brazosport ISD students. If you have any questions, please contact your school principal.

Volunteer’s Name: _____
(Please Print) Last Name First Name

Volunteer’s Signature: _____

Student’s Name: _____
(Please Print) Last Name First Name

Classroom Teacher: _____

****This form will be filed in the Principal’s Office****

BRAZOSPORT INDEPENDENT SCHOOL DISTRICT

**P.O. Drawer Z
Freeport, TX 77542**

**SCHOOL VOLUNTEER
CRIMINAL HISTORY RECORD INFORMATION**

Confidential

The Brazosport Independent School District is authorized by state law to obtain criminal history record information on volunteers being considered with the district (Texas Education Code §22.083). The information requested below is necessary to obtain criminal history record information.

In accordance with Brazosport Independence School District Policy GKG (Local), please read the following statement and complete the requested information.

Please Print or Type (Volunteer Information):

NAME: _____
LAST FIRST MIDDLE

ADDRESS: STREET CITY ZIP

RACE: _____

SEX: MALE _____ FEMALE _____

DATE OF BIRTH: _____ - _____ - _____

SOCIAL SECURITY # _____ - _____ - _____

TO TEXAS DEPARTMENT OF PUBLIC SAFETY AND/OR OTHER APPLICABLE AGENCY:

I do hereby authorize the Brazosport Independent School District to review any and all record of criminal history pertaining to me on file with your agency, and I hereby grant permission to your agency to release such information to the Brazosport Independent School District upon request.

Signature of School Volunteer Date Student's Name (If Applicable)

- Please Print

Campus/Department

I understand the information I am providing about age, sex, and race will not be used to determine eligibility for employment, but will be used solely for the purpose of obtaining criminal history record information.

This form will be filed in the Human Resources Office

DPS Computerized Criminal History (CCH) Verification

(AGENCY COPY)

I, _____, have been notified that a computerized criminal history (CCH) verification check will be performed by accessing the Texas Department of Public Safety Secure Website and will be based on name and DOB information I supply.

Because the name based information is not an exact search and only fingerprint record searches represent true identification to criminal history, the organization (as listed below) conducting the criminal history check is not allowed to discuss any information obtained using this method, therefore the agency may offer the opportunity to have a fingerprint search performed to clear any misidentification based on the name search, if the search provides a criminal report I know could not be mine.

For the fingerprinting process I will be required to submit a full and complete set of my fingerprints for analysis through the Texas Department of Public Safety AFIS (automated fingerprint identification system). I have been made aware that in order to complete this process I must have the correct fingerprinting (FAST) form from this agency, make an online appointment, submit a full and complete set of my fingerprints, and pay a fee of \$9.95 to the fingerprinting services company, L1 Enrollment Services.

Once this process is completed and the agency receives the data from DPS, the information on my fingerprint criminal history record may be discussed with me.

(This copy must remain on file by your agency. Required for future DPS Audits)

Signature of Volunteer

____/____/____
Date

BRAZOSPORT INDEPENDENT SCHOOL DISTRICT
Agency Name (Please print)

Naomi Acevedo
Campus Representative Name (Please print)

Signature of Campus Representative

____/____/____
Date

Please: Check and Initial each Applicable Space		
CCH Report Printed:	YES _____ NO _____	NA _____ initial
Purpose of CCH:	<u>SCHOOL VOLUNTEER</u>	
Hired	<u>N/A</u> Not Hired <u>N/A</u>	<u>N/A</u> initial
Date Printed:	____/____/____	NA _____ initial
Destroyed Date:	____/____/____	NA _____ initial
Retain in your files		